

4/5/1

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 27, 2001 8:00 am**
Secretary of State

04-05-2001 90050 029 ***150.00

DOCUMENT # 600545

1. Entity Name

DRS. MORI, BEAN AND BROOKS, P. A.Principal Place of Business
**3599 UNIVERSITY BLVD., SOUTH
BLDG 300
JACKSONVILLE FL 32216
US**Mailing Address
**3599 UNIVERSITY BLVD., SOUTH
BLDG 300
JACKSONVILLE FL 32216
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1226176**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UTZ, JOSEPH
3599 UNIVERSITY BLVD S
BLDG 300
JACKSONVILLE FL 32216**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and (date if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax-filing requirement and elects to do so...
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00****After MAY-1, 2001: Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****11. OFFICERS AND DIRECTORS**

TITLE	ST	☐ Delete
NAME	GRANFIELD, CHRISTINE	
STREET ADDRESS	3599 UNIVERSITY BLVD S BLDG 300	
CITY-ST-ZIP	JAX FL 32216	
TITLE	VP	☐ Delete
NAME	R. STEPHEN SURRATT	
STREET ADDRESS	3599 UNIVERSITY BLVD S BLDG 300	
CITY-ST-ZIP	JAX FL	
TITLE	P	☐ Delete
NAME	UTZ, JOSEPH	
STREET ADDRESS	3599 UNIVERSITY BLVD S BLDG 300	
CITY-ST-ZIP	JAX FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☒ Change ☐ Addition
NAME	R. Stephen Surraatt	
STREET ADDRESS	3599 University Blvd. S. Bldg 300	
CITY-ST-ZIP	Jax, FL 32216	
TITLE	Vice-President	☒ Change ☐ Addition
NAME	Patrick Gordon	
STREET ADDRESS	3599 University Blvd. S. Bldg 300	
CITY-ST-ZIP	Jax, FL 32216	
TITLE	Secretary/Treasurer	☒ Change ☐ Addition
NAME	Christine Granfield	
STREET ADDRESS	3599 University Blvd. S. Bldg 300	
CITY-ST-ZIP	Jax, FL - 32216	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)